



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4133

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 10/766,854 | FILING DATE 01/30/2004 RULE | CLASS 438 | GROUP ART UNIT 2818 | ATTORNEY DOCKET NO. 03500.000091. |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

Yusuke Fukuchi, Ibaraki, JAPAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS ***** *dh*
 JAPAN 2003-389876 11/19/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/12/2004

| | | | | | |
|---|--|------------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>dh</i> Initials | STATE OR COUNTRY JAPAN | SHEETS DRAWING 9 | TOTAL CLAIMS 8 | INDEPENDENT CLAIMS 1 |
|---|--|------------------------------|------------------------|----------------------|----------------------------|

ADDRESS

5514
 FITZPATRICK CELLA HARPER & SCINTO
 30 ROCKEFELLER PLAZA
 NEW YORK, NY
 10112

TITLE

Processing apparatus and method

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 770 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|